



Your Guide to
**MANAGED
CARE**

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Welcome

Welcome to MO HealthNet Managed Care. This guide will give you the basic information you need to manage your healthcare benefit. Visit dss.mo.gov/mhd/participants/mc to learn more or subscribe for updates or contact:

MO HealthNet Managed Care Enrollment Helpline - 800-348-6627

Call for help with changing a health plan or finding a Primary Care Provider. The Enrollment Helpline is open from 7:00 A.M. to 6:00 P.M., Monday through Friday (except holidays).

MO HealthNet Participant Services Unit - 800-392-2161

Call for questions about eligibility, pharmacy, or premium payments.

MO HealthNet Health Plans

Call if you need help finding a provider or if you have questions about your coverage or any unpaid medical bills.

Health Plan	Contact Information
 Healthy Blue	1-833-388-1407 www.healthybluemo.com
 UnitedHealthcare®	1-866-292-0359 www.uhc.com
 home state health	1-855-694-4663 www.homestatehealth.com

Hearing or Speech Impaired

If you are deaf, hard-of-hearing, deaf-blind, or have difficulty speaking, call Relay Missouri

- **1-800-735-2466 (Voice)**
- **1-800-735-2966 (Text Phone)**

About Managed Care

You will get your health care services through MO HealthNet Managed Care. The Managed Care eligibility groups are:

- MO HealthNet for Families
- Children in care and custody of the state
- Children receiving adoption subsidy
- Children's Health Insurance Program (CHIP)
- MO HealthNet for Kids
- MO HealthNet for Pregnant Women
- Show Me Healthy Babies

If you are not in one of these groups or if you have Medicare, you cannot be in MO HealthNet Managed Care. You would get services through MO HealthNet Fee-For-Service.

How it Works

After you are approved, you will be assigned to a MO HealthNet Managed Care health plan. You will then get a MO HealthNet ID card and a health plan Member ID card in the mail. **You will need to bring both ID cards with you to each of your appointments.** You will also get a letter that gives you information on your new health plan and when services began.

You will continue to get healthcare coverage through Managed Care as long as you are eligible. Each year you will be required to:

1. **Complete an annual review** – This review will make sure you are still eligible for healthcare coverage. If your eligibility changes at any time, your coverage may end.
2. **Review your enrollment** – You will get an annual open enrollment packet where you will have a chance to change your health plan if you want to. If you are happy with your current health plan, you do not have to change anything. If you do not change anything you will stay in your current health plan.

Do I have to be in Managed Care?

You may choose not to be in Managed Care if you meet **one** of the following:

- Eligible for Supplemental Security Income (SSI) benefits
- Meet the SSI medical disability definition
- A child with special health care needs
- Disabled and 18 or younger
- Get foster care or adoption assistance
- In foster care or out-of-home placement

Call **800-348-6627** if you have questions about opting out of Managed Care.

What if I have other insurance?

If you have other health insurance, MO HealthNet needs to know so your claims can be paid correctly. Please call **800-348-6627** to report your other health insurance. You can also report this to the Family Support Division by calling **855-373-4636**.

Health Risk Assessment

The Health Risk Assessment form helps your health plan understand your health care needs. You will need to fill out the form for each person in your household and return it in the pre-paid envelope provided. **If you request to change health plans online or by phone, you do not need to complete this form.**





Do I have to pay a premium?

Based on your family's income and family size, you may need to pay a monthly premium. The letter you get from the Family Support Division about your eligibility will tell you if you need to pay a premium. If you have any questions about premiums, call **800-392-2161**.

You may not be required to pay a premium if your child is:

- Adopted, in foster care, or in care and custody of the state
- A member of a federally-recognized American Indian or Native Alaskan tribe (you must provide proof)

To prove your child is a member, please send a copy of their tribal membership card or official letter issued by the tribe that is recognized by the United States Department of the Interior, Bureau of Indian Affairs by mail, fax, or email to:

MO HealthNet Division
Constituent Services
PO Box 6500
Jefferson City, MO 65102
Fax: 573-526-2471
Email: Ask.MHD@dss.mo.gov

NOTE: Please use "Premium Payments" in the subject line of your email.

Member Rights

As a MO HealthNet Managed Care health plan member, you have certain rights that protect the quality of care you receive from your health plan. You have the right to:

- Be treated with respect and dignity
- Receive needed medical services
- Privacy and confidentiality (including minors) subject to state and federal laws
- Select your own primary care provider
- Refuse treatment
- Receive information about your health care and treatment options
- Participate in decision-making about your health care
- Have access to your medical records and to request changes
- Have someone act on your behalf if you are unable to do so
- Be free of restraint or seclusion from a provider who wants to:
 - Make you do something you should not do
 - Punish you
 - Get back at you
 - Make things easier for him or her
- Be free to exercise these rights without retaliation
- Receive one copy of your medical records once a year at no cost





Member Responsibilities

As a MO HealthNet Managed Care health plan member, you also have certain responsibilities:

- Report any important changes to the Family Support Division online at mydss.mo.gov or by calling **855-373-4636**:
 - The birth of a baby
 - A change in your income
 - A new address
 - A new phone number
- Be knowledgeable about your medical coverage
- Get routine and ongoing care from your providers
- Contact your primary care provider first when needing care
- Only use the emergency room in an emergency
- Make and keep appointments, or call ahead to cancel
- Carry your current MO HealthNet ID Card and your MO HealthNet Managed Care health plan card at all times and present them at your appointments

Managed Care Health Plans

You were automatically enrolled into a MO HealthNet Managed Care health plan the day you were approved for MO HealthNet. You can have one health plan for the whole family or you can have a different health plan for each family member. Each health plan offers the same services and benefits and has a network of doctors, hospitals, and other providers across the state of Missouri that you may see for care.

Your MO HealthNet Managed Care health plan will mail you a member packet that will include a member handbook and your member ID card.

Home State Health


home state health

Member ID #: _____
PCP Name: _____
PCP Address: _____
PCP Phone #: _____

If you have an emergency, call 911 or go to the nearest emergency room (ER). You do not have to contact Home State for an okay before you get emergency services. If you are not sure whether you need to go to the ER, call your PCP or NurseLine at 1-855-694-4663 (TDD/TTY 1-877-250-6113). Relay 711.

10/2014 | Approved March 25, 2015


IMPORTANT TELEPHONE NUMBERS

Members:
Member Services: 1-855-694-4663
Dental: 1-855-694-4663
Vision: 1-855-694-4663
Pharmacy: 1-855-694-4663
24/7 Behavioral Health: 1-855-694-4663
Providers: 1-855-694-4663
Provider Services: 1-855-694-4663
IVR Eligibility: 1-855-694-4663
Medical claims: 1-855-694-4663

TDD/TTY: 1-877-250-6113
Home State Address: 1090 S. Kingsley Road, Suite 500, Chesterfield, MO 63017
EFFECT/ERA please visit www.homesatehealth.com

Home State Health Plan
Attn: CLAIMS
PO Box 4050
Farmington, MO 63640-3829
Provider/claims information via the web: www.HomeStateHealth.com

United Healthcare


UnitedHealthcare Community Plan
Health Plan (80840) 911-86050-02

Member ID: 001600012 Group Number: MOHNET

Member: REISSUE M ENGLISH Payer ID: 1050
DCN #: 9995 112
PCP Name: DOUGLAS GETWELL
PCP Phone: (717) 851-6811
11803 MT ROSE AVE STE B3
YORK, MO 174033051

UnitedHealthcare Community Plan of Missouri
Administered by UnitedHealthcare of the Midwest, Inc.


In case of emergency call 911 or go to nearest emergency room. Printed: 08/2015

This card does not guarantee coverage. To verify benefits or to find a provider, visit the website www.MyUHC.com/CommunityPlan or call.


For Member: 1-855-694-4663 TTY 711
Behavioral Health: 1-855-694-4663 TTY 711
Dental: 1-855-694-4663 TTY 711
Pharmacy: 1-855-694-4663 TTY 711
For Provider: 1-855-694-4663 TTY 711
Medical: 1-855-694-4663 TTY 711

Transportation: 866-292-0359 Pharmacy: 800-392-2161 or 573-751-6527

Healthy Blue


Healthy Blue


Member Name: _____ PCP Name: _____
Member ID #: _____
DCN #: _____
Effective Date: _____
Date of Birth: _____


Healthy Blue

Important Contact Information:
HealthyBlue.com
Member Services: 833-388-1407
Filing a Claim: 833-388-1407
TTY: 711
24-hour Nurse Help Line: 855-697-2642
24/7 Behavioral Health Crisis: 833-405-0088
Rules to covered services: 888-697-1193
Dental Services: 888-496-9535
Pharmacy Services: 888-496-9535
Care Management: 800-392-2161
Subunit medical claims to: 800-470-7262

Subunit medical claims to:
Healthy Blue
P.O. Box 81010
Virginia Beach, VA 23465-1010
MOH1 0121

MO HealthNet


MO HealthNet
Department of Social Services

Member ID #: _____
Date of Birth: _____

USE BY ANYONE WHOSE NAME IS NOT PRINTED ON THIS CARD IS
FRAUDULENT AND SUBJECT TO PROSECUTION UNDER THE LAW

You must present this card each time you get medical services.
You must tell the provider of services if you have other insurance.
Some services may not be covered by MO HealthNet and you may have to pay for services that are not covered. For more information, go to <http://www.dss.mo.gov/mhnd/participants/index.htm>

Par. pan quires 1 30-392-2161 OR 1-573-751-6527
We, Fre, and Abuse 1 30-392-2161 OR ASK.AMD@DSS.MO.GOV

Possession of this card does not certify eligibility or guarantee benefits.
Restrictions apply to certain services.
Services are covered as specified in the Rules and Regulations of the Family Support Division or the MO HealthNet Division.
The holder of this card has made an assignment of rights to the Department of Social Services for payment of medical care from a third-party.

Can I change my health plan?

You have the right to choose the health plan that best fits your health care needs. You can only change your health plan during certain times, including:

- Within 90 days of when your coverage begins
- During your annual open enrollment period
- When a Managed Care health plan changes
- Whenever necessary if your child is adopted or in foster care

You can also request a new health plan anytime you have “just cause,” such as:

- A grievance or appeal
- You or your child’s provider is with a different health plan
- Your provider is culturally insensitive
- The enrollment broker or state agency makes a mistake during a previous assignment process
- You would like your whole family to be with the same health plan
- The state agency puts sanctions on a health plan for not following contract requirements
- Poor quality of care
- No covered health care services or providers in your area who are skilled in dealing with your health care needs
- The health plan does not cover services you or your child needs because of moral or religious reasons

How do I change health plans?

There are three ways you can change your health plan:

1. Request a change online at apps.dss.mo.gov/mhdOnlineEnroll (you will need your PIN number and MO HealthNet ID Number)
2. Call **800-348-6627** (TTY: 711) Monday—Friday from 7 AM - 6 PM
3. Mail your signed and completed health plan change form(s) and Health Risk Assessment in the pre-paid envelope provided to:
MO HealthNet Division
PO Box 104928
Jefferson City, MO 65110

IMPORTANT: You will need to submit a change request form with each family member’s health plan choice.

Covered Services

The services below are covered by all Managed Care health plans. Some services are limited based on your age or eligibility group and other services may be available depending on your needs. Work with your provider to see if the service you need is covered.

Service	Coverage
24-hour access by phone	Covered
Ambulance	Covered
Ambulatory surgical center and birthing centers	Covered
Asthma	Limited Coverage
Behavioral health and Substance Use Disorders (including emergency)	Covered
Chiropractic Services	Limited Coverage
Complementary Health and Alternative Therapy for Chronic Pain	Limited Coverage
Management Services	Covered
Comprehensive Day Rehab (recovery from serious head injury)	Limited Coverage
Diabetes education and self-management training	Limited Coverage
Diabetes Prevention Program (DPP) Services	Limited Coverage
Dental services	Limited Coverage
Durable Medical Equipment (DME)	Limited Coverage
Emergency medical and post-stabilization services	Covered
Family planning services	Covered
Healthy Children and Youth (HCY) services. Examples include:	
<ul style="list-style-type: none"> Physical exams Immunizations (shots) Testing lead levels in blood 	Covered

Service	Coverage
Hearing aids and related services	Limited Coverage
Home health services	Limited Coverage
Hospice (if you are in the last 6 months of life)	Limited Coverage
Inpatient/outpatient services	Covered
Laboratory tests and x-rays	Covered
Maternity services	Covered
Personal care	Covered
Pharmacy	Covered through MO HealthNet Fee-For-Service
Preventative care, including: <ul style="list-style-type: none"> • Well checks • Mammograms • Cancer screenings 	Covered
Podiatry (medical services for your feet)	Limited Coverage
Primary Care Provider services	Covered
Specialist care (with your provider's referral)	Covered
Therapy services (physical, occupational, and speech)	Limited Coverage
Tobacco cessation counseling	Covered
Transplant related services	Covered
Transportation to medical appointments	Limited Coverage
Treat No Transport services	Covered
Local health department services, including: <ul style="list-style-type: none"> • Immunizations (shots) • Screening, diagnosis and treatment of sexually transmitted diseases, HIV, tuberculosis and lead poisoning 	Covered
Vision	Limited Coverage

Choosing a Primary Care Provider



Your primary care provider (or PCP) is the doctor, nurse practitioner, or clinic you call when you need health care services, unless it is an emergency.

You must choose a primary care provider that is with the same health plan you are enrolled in. If you have a chronic illness, special needs, or are pregnant, your primary care provider may be a specialist. You can also choose a Federally Qualified Health Center (FQHC) as your primary care provider. FQHCs provide primary care and other core services such as: health care, preventive (wellness), behavioral health, immunizations (shots), home nurse visits, and other services.

You need to make sure your primary care provider accepts your Managed Care health plan. If they do not, you will need to either choose a new provider or a change health plans.

If you still need to find a primary care provider, contact your health plan directly for help. If you do not choose a provider, the health plan will choose one for you.

How do I change my primary care provider?

If you need to change your primary care provider, contact your health plan directly. It is best to work with the health plan when making important changes so they can be updated in their system.

Helpful Information

Reporting Changes - If you have changes in your income, address or phone number, or have a new baby, report them online at mydss.mo.gov or call the Family Support Division at **855-373-4636**.

Access to Care - Your health plan must make providers available close to where you live. The health plan must provide urgent care for physical or behavioral health illnesses within 24 hours, regular care if you have symptoms within five business days, and regular check-ups within 30 calendar days. There are special requirements for maternity care.

Grievance or Appeal - To make a grievance or appeal, call or write to your MO HealthNet Managed Care health plan.

Identification (ID) Cards - MO HealthNet Managed Care members will receive a MO HealthNet ID card and a Managed Care health plan ID card. Always carry both cards with you and show them every time you get care. If you lose your MO HealthNet ID card, call the Family Support Division at **855-373-4636**. If you lose your Managed Care health plan card, call your health plan.

Pharmacy Dispensing Fee - Members age 19 and older must pay a dispensing fee for each prescription. You will not pay a dispensing fee when the medicine is for an emergency, family planning, a foster child, Healthy Children and Youth services, or a pregnancy related reason. If you cannot pay the dispensing fee, you will still be able to get your prescription; however, you will still owe the fee and should pay it like your other bills.

Release for Moral or Religious Reasons - The health plan may not cover services you or your child needs because of moral or religious reasons. If this happens, your health plan will let you know how and where else to get the service.

Sick Child - If your child gets sick, you should call your primary care provider first unless it is an emergency. If it is an emergency, call 911 or go to the nearest emergency room, even if it is not in your health plan network.

Specialist - If you need a specialist, your primary care provider should refer you.

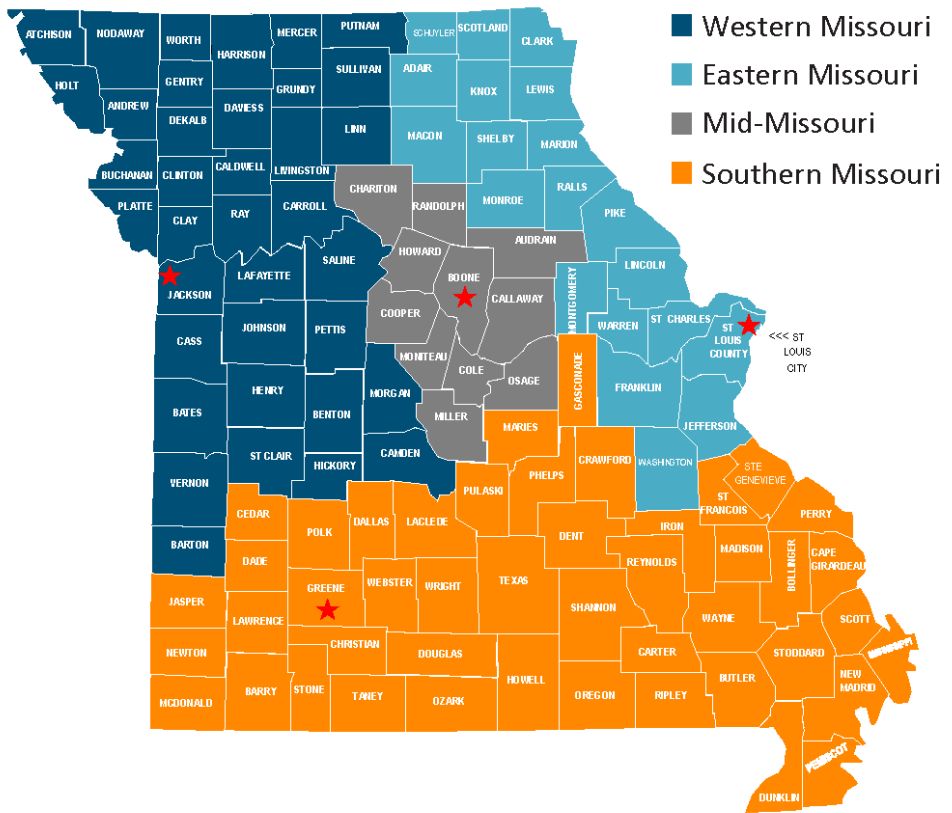
Advocates for Family Health



Advocates for Family Health is an ombudsman service. An ombudsman is a problem solver who can advise and help you. Advocates for Family Health can help you if:

- You need help understanding your rights and benefits under MO HealthNet Managed Care
- You feel your rights to health care are being denied
- You are not able to solve the problem by talking to a nurse, primary care provider or your MO HealthNet Managed Care health plan
- You need to talk to someone outside of your MO HealthNet Managed Care health plan
- You are not sure how to make a grievance or need help filing
- You need help when appealing a decision by your health plan
- You need help requesting a State Fair Hearing

For help, call or write to the Advocates for Family Health office for your county.



Legal Aid of Western MO

4001 Blue Parkway, Suite 300
 Kansas City, MO 64130
 Phone: 816-474-6750
 Toll free: 866-897-0947
 Fax: 816-474-9751

Mid-MO Legal Services

1201 W. Broadway
 Columbia, MO 65203
 Phone: 573-442-0116
 Toll free: 800-568-4931
 Fax: 573-875-0173

Legal Services of Southern MO

809 North Campbell
 Springfield, MO 65802
 Phone: 417-881-1397
 Toll free: 800-444-4863
 Fax: 417-881-2159

Legal Services of Eastern MO

4232 Forest Park Avenue
 St. Louis, MO 63108
 Phone: 314-534-4200
 Toll free: 800-444-0514 ext. 1251
 Fax: 314-534-1028

Non-Discrimination Notice

The MO HealthNet Division complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. MHD does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

The MO HealthNet Division:

- Provides aids and services to people with disabilities at no cost, to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides language services at no cost, to people whose primary
 - Language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need a qualified interpreter, written information in other formats, translation or other services, call the MO HealthNet Managed Care Enrollment Helpline at **800-348-6627**.

If you believe the MO HealthNet Division has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with the Missouri Department of Social Services, Office for Civil Rights at **800-776-8014**; or (866) 735-2460 (Voice); (800) 735-2966 (Text). Complaints may also be filed by writing to: Missouri DSS Office for Civil Rights, P.O. Box 1527, Jefferson City, MO 65102-1527.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at:

ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201, **800-368-1019**, or TDD at 800-537-7697. Complaint forms are available at: hhs.gov/ocr/office/file/index.html.

Multi-language Interpreter Services

English - **ATTENTION:** If you speak English, language assistance services, at no cost, are available to you. Call **1-800-348-6627**.

Spanish - **ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-348-6627**.

Chinese - **注意:** 如果您使用中文, 您可以免費獲得語言援助服務。請致電 **1-800-348-6627**.

Vietnamese - **CHÚ Ý:** Nếu bạn nói tiếng Việt, dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn dành cho bạn. Hãy gọi số **1-800-348-6627**.

Croatian - **NAPOMENA:** Ako govorite hrvatski, dostupna Vam je besplatna podrška na Vašem jeziku. Nazovite **1-800-348-6627**.

Serbian - **NAPOMENA:** Ako govorite srpski jezik, besplatno su vam dostupne usluge jezičke pomoći. Pozovite **1-800-348-6627**.

German - **ACHTUNG:** Wenn Sie Deutsch sprechen, stehen für Sie kostenlos Sprachassistentendienste zur Verfügung. Wählen Sie die Rufnummer **1-800-348-6627**.

Arabic -

هيت اذالك تحت عظامي علا في تامدخ قد عاسملا
قو غلا قحلم كل ناجم الصنقولا ب 1-800-348-6627.

Korean - **주목해 주세요:** 귀하의 언어가 <한국어>인 경우, 아래 번호에서 무료 언어 지원 서비스를 받으실 수 있습니다. 1-800-348-6627번으로 전화하십시오.

Russian - **ВНИМАНИЕ!** Если Вы говорите по-русски, то можете бесплатно воспользоваться услугами языкового сопровождения. Звоните по номеру **1-800-348-6627**.

French - **REMARQUE:** Si vous parlez français, des services d'interprétation sont disponibles gratuitement. **Appelez le 1-800-348-6627.**

Tagalog - PAUNAWA: Kung nagsasalita ka ng Tagalog, may magagamit kang mga serbisyo ng tulong sa wika nang walang gastos. Tumawag sa **1-800-348-6627**.

Dutch - LET OP: Als u Nederlands spreekt, is gratis taalbegeleiding voor u beschikbaar. Bel **1-800-348-6627**.

Persian (Farsi) -

سوئد امش نشه لب هجوت: رگه بنلزی یو رف تبص یم نیک سورس یاه
ریندنلزه ب تروص نلگیر رد
هرامش **1-800-348-6627** سلامت هیگ.

Oromo - HUBACHIISA: Afaan Oromo kan dubbattan yoo ta’e, tajaajilliwwan deeggarsa afaanii, kaffaltii irraa bilisa ta’an, isiniif ni jiraatu **1-800-348-6627** bilbilaa.

Portuguese - ATENÇÃO: Se fala português, tem ao seu dispor serviços linguísticos gratuitos. Ligue para o número **1-800-348-6627**.

Amharic - ማሳሰቢያ:- አማርኛ የሚናገሩ ከሆነ፣ የቋንቋ እገዛ ወይም የትርጉሚያን አገልግሎት በነፃ ያገኛሉ። ወደ **1-800-348-6627** ይደውሉ።

[illegible]

Notes

